

16138 U.S.PTO
102303**PATENT**

ATTORNEY DOCKET N°: 03-1496
EXPRESS MAIL LABEL N°: EV 303 409 897 US

ORIGINAL PATENT APPLICATION TRANSMITTAL LETTER

MAIL STOP PATENT APPLICATION
COMMISSIONER FOR PATENTS
P.O. BOX 1450
ALEXANDRIA, VA 22313-1450

22581 U.S.PTO
10/692664
 102303

Transmitted herewith for filing is the patent application of:

INVENTORS:

Alexander E. Andreev	Anatoli A. Bolotov	Ranko Scepanovic
2774 Glen Firth Drive	7375 Rollingdell Drive #119	14153 Ten Acres Ct.
San Jose, CA 95133	Cupertino, CA 95014	Saratoga, CA 95070
Citizen of Russia	Citizen of Russia	Citizen of United States

Title: **FIFO MEMORY WITH SINGLE PORT MEMORY MODULES FOR ALLOWING SIMULTANEOUS READ AND WRITE OPERATIONS**

CERTIFICATION UNDER 37 C.F.R. §1.10

I hereby certify that this Original Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service on this date, October 23, 2003 in an envelope as "Express Mail Post Office to Addressee", Mailing Label N° EV 303 409 897 US, with sufficient postage, addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Penny L. Flint

Penny L. Flint DATED: October 23, 2003

1. Type of Application

This is an Original Application.

2. Benefit of Prior U.S. Application(s) (35 U.S.C. §)USSNFiling DateInventor(s)Status

3. Papers Enclosed That Are Required for Filing Date under 37 C.F.R. §1.53(b) (Regular) or 37 C.F.R. §1.153 (Design) Application

Thirteen (13) Pages of Specification;

Six (6) Pages of Claims;

One (1) Page of Abstract; and

Two (2) Sheets of Drawing Figures.

4. Additional Papers Enclosed

Information Disclosure Statement is enclosed.

5. Declaration or Oath

The signed Declaration and Power of Attorney is attached

6. Inventorship Statement

The inventorship for all the claims in this application are the same.

7. Language

English.

8. Assignment

The signed Assignment is attached. The Recordation Form Cover Sheet is enclosed.

9. Certified Copy

None are required.

10. Fee Calculation (37 C.F.R. §1.16)

BASIC FEE						\$770.00
EXCESS CLAIM FEE						
TOTAL OVER TWENTY	21	-20	=	1	X \$18.00	\$18.00
INDEPENDENT OVER THREE	3	-3	=	0	\$86.00	\$0.00
MULTIPLE DEPENDENT				0	\$290.00	\$0.00
ASSIGNMENT RECORDATION FEE					\$ 40.00	\$40.00
TOTAL FILING FEES						<u><u>\$828.00</u></u>

11. Small Entity Statement(s)

None required.

12. Request for International - Type Search (37 C.F.R. §1.104(d))

None required.

13. Authorization to Charge Fees

The Commissioner is hereby authorized to charge the filing fees of **\$828.00** to Deposit Account N° 12-2252. Please charge any underpayments related to this filing or credit any excess to Deposit Account N° 12-2252. A copy of this *Transmittal* is enclosed for accounting purposes only.

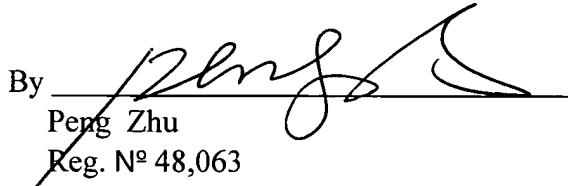
Please direct all correspondence and telephone calls to:

CUSTOMER No. 24319

LEO PETERS
LEGAL DEPARTMENT - IP
LSI LOGIC CORPORATION
M/S D-106
1621 BARBER LANE
MILPITAS, CA 95035

DATED: October 23, 2003.

Respectfully submitted,
Alexander E. Andreev et al.,
LSI Logic Corporation,

By 
Peng Zhu
Reg. N° 48,063

SUTTER • WEST PC LLO
14301 FNB PARKWAY, SUITE 220
OMAHA, NE 68154-5299
(402) 496-0300 (TELEPHONE)
(402) 496-0333 (TELECOPIER)

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